



## **Kansas Association of Addiction Professionals**

**800 SW Jackson, Suite 1100  
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### **Substance Abuse Prevention and Treatment Block Grant in Kansas**

The Federal Substance Abuse Prevention and Treatment Block Grant (SABG) is the largest source of funding in Kansas dedicated to serving Kansas residents with Substance Use Disorder (SUD). In FY 2016, the SABG provided \$14,097,497 in funding to provide treatment for 13,777 unique Kansas residents meeting medical necessity criteria for SUD.

Eligibility for SABG funding is limited to those Kansans whose household income is at or below 200% of Federal Poverty guidelines. The SABG also stipulates that 20% of the federal funds be allocated to provide Primary SUD Prevention services.

In addition, the SABG requires prioritizing the following populations to receive funding and service:

- Pregnant women and women with dependent children
- Intravenous drug users
- Tuberculosis services
- Early intervention services for HIV/AIDS
- Primary prevention services

In FY 2016, a robust network comprised of 42 providers specializing in SUD contracted to provide treatment to SABG eligible Kansas residents. These providers are located throughout the state and ensure that geo-access requirements included in the SABG are met.

Since 1995, The SABG has operated in a managed care environment. This environment utilizes an Administrative Service Organization (ASO) which provides third party oversight of the fee for service delivery system and a high level of accountability for both clinical and fiscal activity. As the managed care system has matured, Kansas has been recognized nationally for its efforts to improve outcomes and accountability.

Key Strengths of the Kansas SABG delivery network include, but are not limited to:

- A mature managed care delivery system that includes clinical and financial oversight
- A delivery system offering a full continuum of SUD care from detoxification to peer mentoring
- Eligible Kansans can receive and transfer care to the appropriate contracted provider regardless of geographical location (reimbursement follows the client statewide)
- Specialized care for priority populations
- Consistent efforts by the provider network to improve outcomes and establish evidenced based clinical services

Key Weaknesses of the Kansas SABG delivery network include, but are not limited to:



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- Obsolete data collection software resulting in system inefficiencies and increased costs to all stakeholders
- Insufficient funding to meet demand for treatment resulting in waiting lists and delayed access to treatment
- Reimbursement rates that are well below the direct cost of providing service and are not competitive with other funding streams
- Federal barriers/block grant stipulations which inhibit innovation and expansion of evidenced based services
- Qualified workforce shortage
- Low level of investment from the state to support SUD services (i.e. State General Fund to and problem gambling and other addictions fund).
- Strict funding and reimbursement streams serve as a barrier to pilot project development.

The system going forward should continue to emphasize strengths and address the weaknesses while making use of the existing and diverse network of providers around the state. In conclusion, providers are motivated and anxious to talk about innovation, service delivery enhancements to improve outcomes, etc. That should be encouraged in the future grant process.

As the Governor's Behavioral Health Planning Council reviews and provides recommendations related to improving the SABG system, it is essential that the Council seek out the SUD expertise available within the current SUD network. The data and information that these experts can provide will assist in the development of informed strategic decisions.